# Tort and Casualty

Recovery Case Manager Ron Vialpando



Investigator Deborah Sorensen





## Topics for discussion

- Purpose of Tort and Casualty
- Referrals
- Investigator duties
- Case Manager duties
- Settlement procedures
- Settlement funds
- What attorneys should know
- Referral contact information



## Purpose

To administer recoveries, overpayments, penalties, adjustments and lien rights when a third party is liable per:

- FEDERAL
  - 42 USCS § 1369a
- STATE
  - C.R.S. 25.5-4-301
- MSB RULES
  - 10 C.C.R. 2505-10, Section 8.061.3



#### Referrals

- Medicaid clients
- Insurance companies
- County technicians via the Colorado Benefits Management System (CBMS) Accident Liability window
- Client Attorneys, Defense Attorneys, District Attorneys, Office of Attorney General (AG)
- Medical Service Questionnaire (MSQ)
- Providers
- Courts
- Colorado Department of Human Services
- State and Federal auditors



# **Investigator Duties**

- Investigate and determine potential third party liable referrals on Medicaid, CICP and CHP+ programs
- Confirm compliance with all HIPAA requirements
- Confirm compliance with all statutory requirements (i.e. notice to Department)
- Collect and document facts pertaining to incident
- Open case and direct to appropriate case manager



# Case Manager Duties

- Prepare claims paid by Medicaid that are related to the case for referral
  - Bodily Injury Accidents
  - Wrongful Injury Settlement
- Represent the Department at mediations, settlements or court proceedings



# Case Manager Duties

- Recover only Medicaid payments (both Federal and State taxpayer dollars) related to case
  - Third party insurance repayments
  - Workers' Compensation repayments
  - Defendant restitution payments from Courts
    - District Attorney represents client and Medicaid
  - Client attorney cases
    - Attorney General represents Department



#### Settlement Procedures

- Priority Per Colorado Statute
  - Medicaid has priority lien over the Medical portion of the recovery
  - Medicare lien is only priority lien over Medicaid
- IF plaintiff intends to settle, notify Medicaid Tort and Casualty unit immediately
  - Lien may be reduced up to 25% for attorney fees (if proper notice received and the Department does not need to have AG's office pursue referral)
  - Medicaid not liable for costs (expert witness, etc)



#### Settlement Funds

Settlements received by Medicaid go back into the State's General Fund for the benefit of all Coloradans





## What attorneys should know

- Claims data goes back 7 years from date of request. Claim records are the only data we provide, no eligibility etc
- No information can be provided to you without a HIPAA compliant release
- Neglecting to submit the release will delay processing of your request
- All records are filed by State ID sometimes referred to as a Medicaid ID
  - Your clients can call the Customer Service Contact Center at 303-866-3513 or 1-800-221-3943 for their ID number



### What attorneys should know

- The Colorado Indigent Care program is not a Medicaid program
  - See the "Clients & Applicants" tab on the Department website. Website: colorado.gov/hcpf
  - The provider supplying the service has subrogation rights
- Medicaid is not an insurance company or employee benefits plan so will not respond to requests for ERISA plan documents
  - The Department is not required to or able to provide "Plan" documents under 29 U.S.C. § 1024(b)(4)

## What attorneys should know

- Providers have 120 days to bill Medicaid from date of service
  - An accurate picture of the claims status may not be reflected when obtained prior to the minimum 120 days
- All requests are worked in date order
- Case managers have over 1500 open cases they are working each month
  - Two case managers process for the whole state, as well as some contracted help from Health Management
    Systems (HMS)

# Letter of Representation

- On letter head
- Claimant name
- Medicaid/ State ID
- Date of Incident
- Type of Incident
- Nature of the Injuries
- Request (all records, related claims, notifying department)



# Elements for HIPAA compliant release

- A description of the information to be used or disclosed that identifies the information in a specific and meaningful fashion;
- A description of the purpose of the disclosure;
- The name or other specific identification of the person or class of persons authorized to make the requested use or disclosure;
- The name or other specific identification of the person or class of persons to whom the covered entity may make the requested use or disclosure;
- An expiration date or event that relates to the individual or the purpose of the use or disclosure;
- A statement of the individual's right to revoke the authorization in writing, the exceptions to the right to revoke and a description of how the individual may revoke the authorization;
- A statement that information used or disclosed under the authorization may be redisclosed by the recipient and no longer protected by Privacy rule;
- Signature of the individual and date; and

(Letter of representation must match information to be disclosed client agreed to on the release.)

#### Referral contact information

Submit letter of representation and HIPPA compliant release to:

**Mailing Address:** 

Colorado Department of Health Care Policy & Financing

Benefits Coordination Section

1570 Grant Street

Denver, Colorado 80203

Attention: Deborah Sorensen

**Phone:** 303-866-3109

**Fax:** 303-866-3552

